24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check If 24-hour report 48-hour report New report Amends report	t filed on Man / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee SEIU General Fund	Date
Mailing Address 1800 Massachusetts Ave NW	09
City State Zip Code Washington DC 20036	169072.19 Transaction ID : D292572
Purpose of Expenditure Est. payment for salary and other canvass-related expenses starting on 9/12 Category/ Type 001	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ	Check One: President Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date / P D / Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	169072.19
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	169072.19
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Eliseo Medina [Electronically Filed] Date	09 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	